## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless corrected maintenance fee notifical	correspondence including ad below or directed other	ng the l herwise	Patent, advance or in Block 1, by (a	ders and notification  a) specifying a new c	of m	paintenance fees woondence address;	vill be r and/or	nailed to the current (b) indicating a sepa	corre	espondence address as "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
PANASONIC PATENT CENTER 1130 CONNECTICUT AVENUE NW, SUITE 1100 WASHINGTON, DC 20036						Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
										(Depositor's name)	
										(Signature)	
										(Date)	
APPLICATION NO.	FILING DATE		;	FIRST NAMED INVEN	TTOR AT			TORNEY DOCKET NO.		CONFIRMATION NO.	
10/554,147	10/554,147 07/31/2006			Wataru Ikeda			P34029-02			3256	
ITTLE OF INVENTIO! REPRODUCING METH		OIUM,	REPRODUCING	APPARATUS, REC	ORD	ING METHOD,	REPRO	DUCING PROGRA	М, А	AND	
APPLN. TYPE	SMALL ENTITY	ISS	SUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	E FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	visional NO		\$1510	\$300		\$0		\$1810		03/03/2010	
EXAMINER			ART UNIT	CLASS-SUBCLASS							
HARVEY, DAVID E			2621 386-098000								
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				or agents OR, alter  (2) the name of a seriestered attorney 2 registered patent	e names of up to 3 registered patent attorneys ents OR, alternatively, e name of a single firm (having as a member a ered attorney or agent) and the names of up to stered patent attorneys or agents. If no name is a no name will be printed.  1 Panasonic Patent Center  2 Dhiren ODEDRA  3 Kerry CULPEPPER						
PLEASE NOTE: Unl recordation as set forth (A) NAME OF ASSIGN	ND RESIDENCE DAT. ess an assignee is ident h in 37 CFR 3.11. Com GNEE  C Corporati	ified be pletion		•	he pa g an a CITY	tent. If an assignessignment. and STATE OR C			ocum	ent has been filed for	
Please check the appropr	iate assignee category or	catego	ries (will not be pr	inted on the patent):		Individual 🖾 Co	rporatio	on or other private gro	up e	ntity 🗖 Government	
4a. The following fee(s) a  Issue Fee  Publication Fee (N  Advance Order - #	<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3281 (enclose an extra copy of this form).</li> </ul>										
a. Applicant claim	tus (from status indicate s SMALL ENTITY statu d Publication Fee (if req	us. See uired) v	37 CFR 1.27.	from anyone other the				TTY status. See 37 CI			
interest as shown by the i	records of the United Sta	nes Pan	ent and Trademark	Office.							
Authorized Signature	/Dhiren Ode	edra	Req.# 41	,227/		Date_Dece	mbe	r 21, 2009			
Typed or printed name	<sub>e</sub> Dhiren Ode	dra				Registration N	o. 41	,227			
This collection of inform an application. Confident submitting the complete this form and/or suggesti Box 1450, Alexandria, V	tiality is governed by 35 I application form to the ons for reducing this bu	U.S.C. USPT rden. sh	. 122 and 37 CFR O. Time will vary nould be sent to the	1.14. This collection in depending upon the in Chief Information C	s esti indivi office	mated to take 12 r dual case. Any co r. U.S. Patent and	ninutes mments Tradem	to complete, including on the amount of tireark Office, U.S. Depart	g gat ne yo artme	hering, preparing, and ou require to complete ent of Commerce, P.O.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.